



01-31-05

REC
EFW

Atty. Dkt. No. 310473-1600

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Guy Michael MILLER et al.

Title: METHODS FOR THE PREVENTION AND TREATMENT OF NON-CARDIOVASCULAR TISSUE ISCHEMIA USING GAMMA-TOCOPHEROL AND METABOLITES THEREOF

Appl. No.: 10/017,717

Appl. Filing Date: 12/14/2001

Examiner: P. Spivack

Art Unit: 1614

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EV 577 777 761 US (Express Mail Label Number)	1-27-05 (Date of Deposit)
Rene Campos (Printed Name)	
 (Signature)	

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)



a. Previously submitted:

b. Enclosed are:

☒ Amendment/Reply (18 pgs.);

☒ Supplemental Information Disclosure Statement (2 pgs.);

☒ Form PTO-1449 with 3 listed references (1 pg.);

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	32	- 97	=0	x \$50.00	= \$0.00
Independents	4	- 8	=0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

<input type="checkbox"/>	Extension for response filed within the first month:	\$120.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$0.00
CLAIMS AND EXTENSION FEE TOTAL:				\$790.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$395.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:				395.00

[X] Check No. 1101 in the amount of 0 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Jan. 26, 2005

By Lorna L. Tanner

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